I. A.T.S.E. OFFICER INSTITUTE APPLICATION 2022

Applications must be submitted to the I.A.T.S.E. Education Department at least 3 weeks prior to the beginning of the 5-day course.

PARTICIPANTS ARE REQUIRED TO ATTEND ALL CLASSES TO GRADUATE AND TO RECEIVE THEIR DIPLOMA. PLEASE PRINT LEGIBLY

1. APPLICANT					
LAST NAME		FIRST NAM	E		MIDDLE INITIAL
NAME AS YOU WISH IT TO APPEAR ON DIPLOMA, if different from above:				JACKET SIZE Women's S M L XL	
				Men's M L XL 2XLXL	
STREET ADDRESS				HOME PHONE	
STREET ADDRESS					IONE
					<u>-</u>
CITY	STATE/	PROVINCE	ZIP/POSTAL CODE	WORK PHONE:	
CELL PHONE	EMAIL /	EMAIL ADDRESS (please print)			
2. IATSE OFFICER INSTITUTE					
CLEVELAND, OH OCTOBER 17 - 21, 2022					
FOR U.S. AND CANADIAN LOCALS					
3. LOCAL UNION INFORMATION					
LOCAL NUMBER LOCAL UNION CITY/	STATE	POSITION AT LOCAL			HOW LONG IN CURRENT
					OFFICE
OTHER UNION POISITIONS PREVIOUSLY HELD:					
4. APPLICANT SIGNATURE					
I certify that all the information on this form is true and complete to the best of my knowledge. I agree that the I.A.T.S.E. can share my					
name with its General Executive Board and with any local union. I consent to the use by I.A.T.S.E. of my name or likeness to promote or					
publicize the I.A.T.S.E. (whether in print or electronic form or otherwise). I hereby release I.A.T.S.E. from any and all liability for using my name or likeness and waive all claims against I.A.T.S.E. arising from the use of such information. I also hereby grant a license to I.A.T.S.E. to					
use my name or likeness and expressly disclaim all rights to all value and benefit(s) I.A.T.S.E. may gain through the use of such information.					
SIGNED		,		DATE	
5. AUTHORIZATION FROM THE LOCAL UNION EX	KECUTIVE I	BOARD			
certify that I.A.T.S.E. LOCALendorses the enrollment of the above-named applicant in the I.A.T.S.					
SIGNED					DATE
TITLE					
FOR I.A.T.S.E. EDUCATION DEPARTMENT USE					
APPLICATION RECEIVED	TION		INITIALS		
APPLICATION RECEIVED STATUS AND NOTIFICATION INITIALS					
	1				

Return Completed Application via Email or Mail to: